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*Memorandum**Rytle*

TO : See Below

DATE: December 8, 1967

FROM : Martha L. Phillips, Chief, Grants Review Branch
Division of Regional Medical Programs

SUBJECT: "Purple Sheets"

The attached copies of "Purple Sheets" reflect the actions taken on applications considered at the November 20-21 meeting of the National Advisory Council.

The award of the two new operational applications (Tennessee Mid-South and Washington/Alaska) will be made only after negotiation which may rearrange the level of recommended funding of some individual projects. You are also reminded that the award to the Western New York (Buffalo) region is to be negotiated following a Council site visit.

Distribution of this memorandum to:

Dr. Marston/Mr. Yordy - 1

Mr. Odoroff - 1

Dr. Sloan - 1

Mr. Friedlander - 1

Miss Abrams (for Planning & Evaluation) - 4

Dr. Stephenson (for Operations Staff) - 2

Mr. Beattie (for Grants Management) - 2

Dr. Manegold (for Program Development & Research) - 3



Kryotte

Memorandum

TO : THE RECORD

DATE: November 27, 1967

FROM : Public Health Advisor
Grants Review Branch

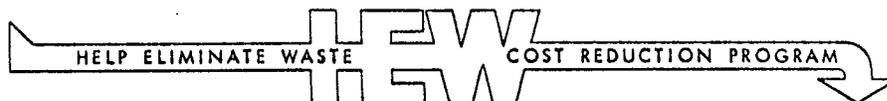
SUBJECT: Recommendation on the Operational Supplement submitted by the Missouri Regional Medical Program, 3 G03 RM 00009-01S2, National Advisory Council Meeting, November 20-21, 1967

MOTION: Disapproval. (#5)

Council was in essential agreement with the Review Committee that this is a thinly disguised request for immediate financial assistance for support of continued operation of the Kansas City General Hospital as a center of training and as a continuing education resource for the Kansas City area. Although it is certainly possible under Public Law 89-239 to support the cost of patient care under certain special circumstances and in direct relationship to heart disease, cancer, stroke and related diseases, the use of Regional Medical Program funds to perpetuate the existence of a traditional large open-ward general hospital is inappropriate, principally for two reasons: (1) the plight of such hospitals in cities throughout the Nation is essentially the same and Regional Medical Program funds cannot and should not be used to bridge the gap created by delays in Medicare and Medicaid reimbursement, or provide basic support which has not been forthcoming from local funding mechanisms; (2) relevance of this project and others which might be designed upon the same lines to the goals of Regional Medical Programs has not been shown.

Council expressed great confidence in the staff of the Missouri Regional Medical Program and its performance to date. It seems evident that had the planning for this project been less hasty and less dominated by fiscal urgency, the project could have been almost classic in its appropriateness as an approach to improved care in an urban setting. Although there was unanimous agreement with the recommendation for disapproval, it was apparent that Council would be willing at any time to look at another proposal from this region for a project for urban Kansas City and involving Kansas City General Hospital and related "Hospital Hill" activity which would clearly demonstrate its relevance to Regional Medical Programs.

Peter A. Clepper
Peter A. Clepper



Memorandum

TO : THE RECORD

DATE: November 24, 1967

FROM : Public Health Advisor
Grants Review Branch

SUBJECT: Recommendation on the Supplemental Planning Grant Application submitted by the Western New York (Buffalo) Regional Medical Program, 3 G02 RM 00013-02S1, National Advisory Council Meeting on November 20-21, 1967

MOTION: Conditional approval (#2) in principle, of all three components of this application subject to a Council site visit to (a) identify fundable planning aspects of each activity and (b) determine the amount to be awarded.

The Council was cognizant of the apparent operational facets of the proposed communications network and coronary care training activities, and concern was expressed as to the appropriateness of outright or partial approval of these two proposals as additional planning without further delineation between the planning and operational phases. The Council considered the third activity in pulmonary care as a straightforward six-month planning request but with the recognition that an operational request in this area could be substantial. The proposed methods to evaluate the results of each activity were not felt to be a strength of this application.

In discussing the communications network proposal, it was noted that it will be based in part upon the success of another medical communications program (Albany) which has already been demonstrated as feasible. This fact together with the proposed magnitude (both content and geographic area to be covered), the projected three-year budget at approximately the same annual level of expenditure, and the obvious high degree of planning already accomplished, tend to support this as an operational rather than a planning project. It was suggested that the applicant may want to consider building a communications network upon a more modest but functional base.

Although the coronary care training program requests only one year of support, it was described by Council as an operational project. This is not a unique educational demonstration but rather a proposal in an area where similar programs have been tried, tested and proven. The degree of planning accomplished prior to the writing of this project and the acknowledged involvement of peripheral as well as nearby medical and nursing resources give further evidence of the readiness of this activity to enter its operational phase.



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Since this application had been submitted as a planning supplement, the applicant had not submitted specific information usually required in support of an operational request. Accordingly, and in keeping with the wishes of the applicant, the Council did not consider the communications network and the coronary care training program as a two-part operational request.

The Council felt that all the proposals presented in this application are worthy of support. However, after full and thorough discussion of this application, the questions raised and the appropriate use of planning and operational funds, it was determined that a Council site visit would be necessary so as to identify those facets which could be funded.

Robert E. Jones
Robert E. Jones

Memorandum

TO : THE RECORD

DATE: November 24, 1967

FROM : Public Health Advisor
Grants Review BranchSUBJECT: Recommendation on the Operational Supplement submitted by the
Intermountain Regional Medical Program, 3 G03 RM 00015-01S2,
National Advisory Council Meeting, November 20-21, 1967

MOTION: Project #1 - The Control of Chronic Renal Disease - DISAPPROVED
Project #2 - Endocrine Metabolic Laboratory - APPROVED in
time and amount requested

Project #1

The discussion centered mainly on the policy and precedent-setting issues in a very broad and general sense. There was agreement that this project is primarily a service function with very little research and training involved. The interesting social-ethical aspects are obvious and calls for discussion both inside and outside medicine. However, there was agreement that, even though the homotransplantation project has relevance as a "related" disease to Regional Medical Programs, it is not within the purview of the program. It was also pointed out that if similar projects, likewise service in function, were extended throughout the United States, could require support in excess of the entire Regional Medical Program funds. The Council also agreed that implementation of any such projects should await the results of special studies now underway by the PHS and the BOB.

Project #2

Council was divided in approach to the support of the project, albeit in agreement as to its significance to Regional Medical Programs. On the one hand, Council believed support of such a laboratory is of unquestionable value in early detection of hypertension, and some forms of heart disease and in the diagnosis of some cancers. The idea is meritorious also from an educational standpoint, as it will increase interest and improvement in the management of hypertension - a disease which is being appropriately managed in only a small fraction of the 17 million estimated cases.

On the other hand, the precedent-setting aspects are obvious; a relatively small percentage of hypertensives will be seen from screening procedures in a laboratory established for general endocrine diagnostic purposes; and also,



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2.

it was believed that the phasing is inverted, i.e., education of physicians and ancillary personnel should precede setting up the screening process, the latter establishment of such a laboratory facility.

Although a majority decision resulted, there were two negative votes recorded, with seven in favor of recommendation for approval.

Jessic F. Salazar

Ky. Att

Memorandum

TO : THE RECORD

DATE: December 1, 1967

FROM : Peter Clepper *PC*
Public Health Advisor
Grants Review Branch

SUBJECT: Recommendation on the operational grant application submitted by the Tennessee Mid-South Regional Medical Program, 1 G03 RM 00018-01, National Advisory Council Meeting - November 20-21, 1967

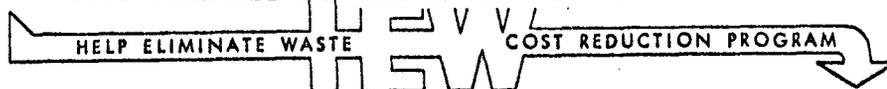
MOTION: Approval in the amount of \$1,500,000 in direct costs for the first year, and at the same level, less nonrecurring costs, for the remaining year of the program period.

The Council was satisfied that the Region has the mechanisms available for an operational program. Special mention was made of the intercommunity and interracial cooperation evident in the application. Shortcomings in the program are the absence of stroke projects and lack of full acceptance of the program on the part of the State Medical Society, which was apparent to the site visitors. Specific strengths of the program are its leadership; the degree of developed and developing cooperative arrangements among the health care facilities in the Region; and the personal commitment of widely representative health professionals.

The final decision on the recommended dollar amount was based, not only on the total of the "approved" projects, but on a general agreement that the \$1.5 million will provide for an adequate program base upon which the Region may build.

The recommendation affects the individual projects as follows:

<u>Project No.</u>	<u>Project Description</u>	<u>Requested Amount</u>	<u>Approved Amount</u>
1	<u>Continuing Medical Education (Meharry)</u> Approval based on site-visitor and Review Committee recommendations, as an interesting approach to the special problem of the Negro physician in the Region.	\$ 51,802	\$ 51,802
2,3,4,5	<u>Continuing Education (Vanderbilt), Education Centers (Hopkinsville & Chattanooga), Radiologist Education (Vanderbilt)</u> These projects should be deferred for additional planning and rewriting, for reasons set forth by the site visitors and the Review Committee.	358,189	-0-



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<u>Project No.</u>	<u>Project Description</u>	<u>Requested Amount</u>	<u>Approved Amount</u>
6	<u>Cardiac Nurse Training Program</u> Approval is recommended.	\$ 59,695	\$ 59,695
7	<u>School of X-ray Technology (Meharry)</u> Approval based on recommendation of Committee and site visitors as contributing to regional activities.	22,702	22,702
8,9,10	<u>Radiology Technology (Vanderbilt), Nuclear Medicine Training (Vanderbilt), Medical Technology School (Chattanooga)</u> Approval based on recommendation of site visitors and Review Committee, at a slightly reduced amount.	113,400	100,000
11-21	<u>Coronary Care Units</u> Approval based on site visitors and Review Committee's recommendations which were for support at a more reduced budget level.	511,659	300,000
22,23,24	<u>Computer-Linked Program to Improve Super-voltage Therapy</u> As mentioned at the Review Committee meeting, the console equipment proposed in the application is not yet available for general use. However, other methods of promoting a communications system for central calculation and relay of dosimetry levels are now in use and are generally far less expensive than equipment proposed here. Council recommends that the present proposals not be supported as outlined, but that the Region be encouraged to investigate other systems to meet this real need. Hence, Council agreed with the Committee's recommendation that these projects not be funded, but altered its recommendation on forbidding use of RMP funds.	119,351	-0-
25	<u>Supervoltage Therapy (Meharry)</u> Approval based on Review Committee's recommendation (in turn based on the recommendation of the expert site visit team) as a facility appropriate for the school.	73,021	73,021

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<u>Project No.</u>	<u>Project Description</u>	<u>Requested Amount</u>	<u>3 Approved Amount</u>
26	<u>Rehabilitation Center (Vanderbilt)</u> Disapproval, as recommended by Review Committee. Council agreed that the project is for a single institution with limited application to the Region as a whole and without sufficient demonstration of categorical relevance. Consequently, it was further recommended that RMP funds <u>not</u> be used for this project.	\$ 151,038	-0-
27	<u>Patient Care in a Remote Mountain Community</u> Approval based on site visitors and Review Committee's recommendations as a modest request which will draw upon local manpower for filling necessary hospital positions.	10,560	10,560
28	<u>Multiphasic Screening Center (Meharry)</u> Approval up to the amount requested, as a necessary and worthy project which is particularly suitable to the purposes of Regional Medical Programs. This is a project directly related to patient welfare and offers a promising approach to bringing diagnostic services and consequent treatment to a large group of underprivileged who would not otherwise have opportunities for this type of care. The members of the Council agreed that there are weaknesses in the planning for the Center, but this approach to patient treatment has been tried elsewhere; there is a large and growing body of expert opinion which can be drawn upon, especially that now supported by the Public Health Service.	747,043	747,043

Accordingly, the Council approved the project in principle and recommended that it be funded up to the amount requested with the condition that the staff consult with the applicant about expertise available, and that the applicant accepts the help needed to develop a workable project.

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<u>Project No.</u>	<u>Project Description</u>	<u>Requested Amount</u>	<u>Approved Amount</u>
29,30,31	<u>Patient Care Models</u> Approval as innovative projects with high potential for achieving the goals stated, and provided with leadership of unusually high character. Council decided that the projects <u>are</u> relevant to Regional Medical Programs as useful experiments in patterns of patient care, role definition, and social engineering for discovering optimal care patterns.	\$ 100,646	\$ 100,646
32	<u>Nurse Specialist Graduate Program</u> Disapproval as recommended by the site visitors and the Review Committee. The program is not essential to patient study and is eligible for support under a program of the PHS Division of Nursing.	25,620	-0-
33	<u>Biomedical Science Summer Program (Meharry)</u> Disapproval as recommended by the Review Committee. The project is commendable, but since it involves prebaccalaureate students who are not even committed to careers in the health field, Council decided that it is beyond the scope of Regional Medical Program objectives.	150,540	-0-
34	<u>Medical Data Processing (Vanderbilt)</u> Disapproval as recommended by the Review Committee as being unsuitable for use of RMP funds. This is a general research project into one hospital data system without demonstrable relevance to regional objectives. Use of RMP funds should be excluded until such time as the project can be re-developed; the methodology and plan for regional relevance can be presented in more specific detail.	112,362	-0-
TOTAL		<u>\$2,607,628</u>	<u>\$1,465,469</u>

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UNITED STATES GOVERNMENT

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

Memorandum

TO : THE RECORD

DATE: November 27, 1967

FROM : Public Health Advisor
Grants Review Branch

SUBJECT: Recommendation on Supplemental Planning Grant Application
submitted by Oklahoma Regional Medical Program, 3 G02 RM 00023-02S1,
National Advisory Council Meeting, November 20-21, 1967

MOTION: Approval in the time and amount requested. (#1)

Council expressed great interest in this application which will provide funds for supplementary planning activities for this Regional Medical Program. It defines needs which were not anticipated originally and proposes an imaginative approach to their solution. It also provides for the extension of the committed program period for one additional year.

Some concern was expressed relative to the region's slowness in recruiting a permanent full-time coordinator. It was felt that although the present coordinator is devoting his full attention to the program, it is unlikely that the region will move smoothly into a full-fledged operational program until a permanent person is found.

P. A. Clepper
Peter A. Clepper



Ky title

Memorandum

TO : THE RECORD

DATE: November 27, 1967

FROM : Public Health Advisor
Grants Review Branch

SUBJECT: Recommendation on the Operational Grant Application submitted by the Rochester (N.Y.) Regional Medical Program, 1 G03 RM 00025-01, National Advisory Council Meeting on November 20-21, 1967

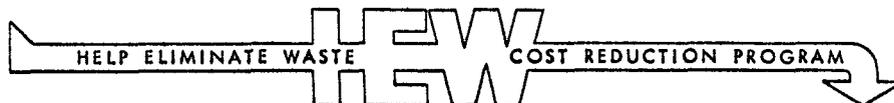
MOTION: Approval (#1) in the time and amounts requested for components one through four described below; disapproval (#5) of component five described below, with further recommendation that no DRMP funds be used to support this activity.

A joint Committee-Council site visit was made to this regional medical program on November 15, 1967, as suggested by the Review Committee last month. The results of this visit were reported to Council, and it was evident the findings of the site visit group substantiated the fact that this regional medical program is well established and ready to inaugurate an operational program. Accordingly, the Council concurred in general with the conclusion of the Review Committee.

The Council was cognizant that the components of this application represent a cohesive initial approach to the problems of cardiovascular disease and that a significant number of cardiologists will be available to provide necessary support. It was indicated, however, that appropriate attention needs to be given the development of a balanced program in all three of the major categorical diseases as time, manpower and resources permit. The active participation of nurses both in the planning as well as operational phases was especially noted by the Council.

A summary of the recommendations made by the National Advisory Council on each of the five component projects contained in this application follows. Dollar amounts are given for first-year direct costs only.

	<u>Requested Support</u>	<u>Recommended Support</u>
1. <u>Support for reconstruction and equipping of facilities for use as a learning center for projected training programs related to heart disease, cancer, and stroke</u> - The Council concurred with the Committee as to approval of this modest request. It was evident from the site visit that educational services will	\$ 26,400	\$ 26,400



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(cont'd.)	<u>Requested</u> <u>Support</u>	<u>Recommended</u> <u>Support</u>
1. radiate out from this resource to peripheral facilities. The work already accomplished in the planning of the coronary care nurse training program is illustrative of the way in which this heart, cancer, and stroke learning center will be utilized for the benefit of the entire region.		
2. <u>Postgraduate training program for physicians in the Rochester ten county region</u> - In approving this proposal, the Council gave particular attention to the response of this training program to expressed peripheral needs, the depth of medical specialty manpower available to carry out this program, and the thoroughness with which this project has been planned.	\$ 83,857	\$ 83,857
3. <u>Registry of patients with acute myocardial infarction in the Rochester regional hospitals</u> - It was noted that the form to be used in this registry had been developed by the State Department of Health and the State Heart Assembly, and that goals for its use go beyond that of data gathering.	\$ 21,180	\$ 21,180
4. <u>Proposal for the establishment and support of a regional laboratory for the education and training in the care of patients with thrombotic and hemorrhagic disorders</u> - The Council concurred with the Review Committee as to the appropriateness of this request. It was indicated that this laboratory can make a major contribution in providing a needed consultation-education resource, and gives assurance that efforts to stimulate cooperative quality control will have the necessary support in manpower and equipment.	\$ 69,420	\$ 69,420

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	<u>Requested Support</u>	<u>Recommended Support</u>
5. <u>Study of the cardiac output by electrical impedance plethysmography</u> - It was noted that this was the only project in which the Committee had expressed concern. Based upon the findings of the site team, the Council concluded that the proposed method would require additional laboratory investigation before results would be applicable to patients. In recommending disapproval of this project, the Council further recommended that no DRMP funds be used to pursue this activity.	\$ 17,121	none
	<u> </u>	<u> </u>
TOTAL	\$217,978	\$200,857

Robert E. Jones
Robert E. Jones

*Ky tll**Memorandum*

TO : THE RECORD

DATE: November 27, 1967

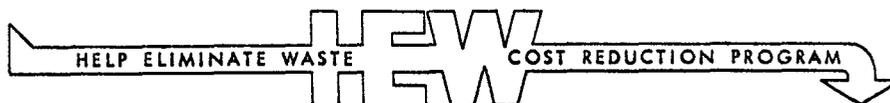
FROM : Public Health Advisor
Grants Review BranchSUBJECT: Recommendation on South Carolina Regional Medical Program, -
2 G02 RM 00035-02, National Advisory Council Meeting,
November 20-21, 1967

MOTION: The Council recommended a grant for the time and in the amount requested (#1).

This is a competing application for a second year planning grant. The initial planning award was made for one year only. Discussion of the application was brief. Major concern was expressed about the absence of a permanent director. Reluctance of practicing physicians in the Region to cooperate was also mentioned. The possibility was suggested that the Regional Program has realized more progress than is evident in this application.

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Patricia McDonald



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Memorandum

TO : THE RECORD
Public Health Advisor
FROM : Grants Review Branch

DATE: November 28, 1967

SUBJECT: Recommendation on the Operational Grant Application submitted by the Washington-Alaska Regional Medical Program, 1 G03 RM 00038-01R, National Advisory Council Meeting on November 20-21, 1967

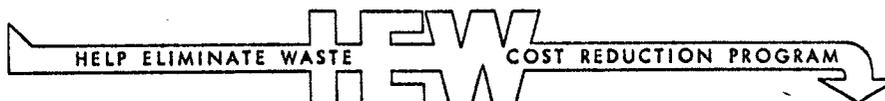
MOTION: Conditional approval (#2) for two years, direct costs of which shall not exceed \$969,904 in the first year and an equal amount in the second year, exclusive of nonrecurring costs, to continue allowable activities presented in the application.

The Council concurred in the Review Committee's finding as to the viability of this regional medical program and its readiness to mount an operational program. Final approval of this operational grant request is contingent upon the applicant's submission of an acceptable revised budget to the Division of Regional Medical Programs which reflects projected activities within the intent of the Council's recommendation. Dr. Hogness was not present during the discussion of this application.

A summary of the recommendations made by the National Advisory Council on each of the eighteen component projects contained in this application follows. Dollar amounts shown are for first-year direct costs only. 1/

Section I: Education and Training

	<u>Requested Support</u>	<u>Recommended Support</u>
1. <u>Central Washington</u> - This project was considered responsive to the expressed needs of practicing physicians for continuing education so as to improve their capabilities to provide quality medical service to patients.	\$ 18,181	\$ 18,181
2. <u>Southeastern Alaska</u> - This proposal was viewed as similar in many ways to the first project and also worthy of support. It was felt that this initial effort might be expected to develop into a broader operational program in Alaska.	\$ 27,062	\$ 27,062



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	<u>Requested Support</u>	<u>Recommended Support</u>
3. <u>Preceptorships</u> - The Council concluded this was another worthwhile and logical approach leading toward the delivery of improved health services.	\$ 17,610	\$ 17,610
4. <u>Telephone-Radio Conferences</u> - There was agreement with the findings of the Review Committee to support this project. The relatively modest first-year request was noted but with the recognition that supplemental funds may be requested to expand this pilot program.	\$ 8,445 -	\$ 8,445
5. <u>Educational Support Unit</u> - The Council was cognizant of the considerable amount of planning that had gone into this project. It also expressed confidence in the staff thus far selected to man this activity. A primary concern had to do with a balanced approach to the education and informational needs in all three major categorical diseases; accordingly, it was indicated that adequate attention should be given the area of stroke and that this might be accomplished through the active participation of the proposed Professional Advisory Committee as well as other means. Other concerns had to do with (a) the amount of time to be expended by key professional staff although it is possible that the estimates given are in reality conservative, and (b) the ability of the WARMP to recruit required staff and go fully operational in the first year.	\$522,304	\$522,304
<p>In discussing this proposal, the Council made reference to the emerging need to give appropriate attention to the broader issues inherent in the support of comprehensive audio-visual resources such as this. DRMP staff indicated that this whole area was receiving active attention, and that policies in this regard would be formulated.</p>		
6. <u>Coronary Care Unit Coordination</u> - In recommending full support for this project, the Council stressed the growing need for this type of program in view of the increasing	\$ 70,285	\$ 70,285

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<u>Requested</u> <u>Support</u>	<u>Recommended</u> <u>Support</u>
------------------------------------	--------------------------------------

(cont'd)

- | | | |
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| 6. interest in and activation of coronary care units. The involvement of both physicians and nurses was felt to be commendable. | | |
| 7. <u>Continuing Education of Technicians</u> - There was agreement that this project will help strengthen laboratory services which benefit patients. One Council member concurred in the Review Committee's concern as to the need for negotiation with the applicant in regard to the training fees to be paid cooperating laboratories. | \$ 53,446 | \$ 53,446 |
| 8. <u>Cardio-Pulmonary Technician Training</u> - The Council was in agreement with the Review Committee's finding to support this project. | \$ 41,554 | \$ 41,554 |
| 9. <u>Alaska Medical Library</u> - The Council agreed that this was a modest request and worthy of support. At least one Council member suggested that a higher initial amount would have been justified. | \$ 21,754 | \$ 21,754 |

Section II: Patient Study and Service

- | | | |
|---|-----------|-----------|
| 10. <u>Anchorage Cancer Program</u> - The need for this program in Alaska was felt to be evident and the Council unanimously recommended approval. The Council had the benefit of review of this proposal by the NCI which also recommends support. The suggestion was made that this project might more appropriately be referred to as the Alaska Cancer Program. | \$ 51,450 | \$ 51,450 |
| 11. <u>Children with Cancer Study</u> - The Council expressed the belief that this study could produce meaningful information which could be utilized in improving the care of children with cancer. The NCI did not submit a technical review of this project. | \$ 28,030 | \$ 28,030 |
| 12. <u>Radiation Physicist</u> - The Council concurred with the recommendation of the Review Committee as to the approval of this project. The Council had the benefit of a review by the NCI which also recommended support as requested. | \$ 56,393 | \$ 56,393 |

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<u>Section III: Developmental</u>		<u>Requested Support</u>	<u>Recommended Support</u>
13.	<u>Laboratory Evaluation of Renal and Adrenal Hypertension</u> - In recommending disapproval of this project, it was suggested that preliminary studies need to be conducted before reapplication is made to pursue this as an operational activity.	\$ 51,875	none
14.	<u>Ocular Plethysmography</u> - The Council concurred in the recommendation of the Review Committee to disapprove this project with the stipulation that no DRMP funds be used to pursue this research activity.	\$ 27,935	none
15.	<u>Early Detection of Ischemic Heart Disease</u> - It was the consensus of the Council that this proposal not be supported as submitted but that the applicant be encouraged to develop a more definitive protocol. Of primary concern was the lack of methodology to support this proposal as either a teaching or epidemiologic activity, or both.	\$ 56,163	none
16.	<u>Laboratory Data Systems</u> - The Council did not recommend support of this project. One Council member suggested further planning of this program with the possible implementation of a more limited pilot program.	\$ 42,431	none
17.	<u>Standards of Nursing Care</u> - It was not felt that the proposed methodology gave reasonable assurance that valid and meaningful results would be obtained in this study. Recommendation was for disapproval.	\$ 32,408	none
18.	<u>Computer-Aided Instruction</u> - The Council concurred in the Committee's recommendations to support this proposal.	\$ 53,390	\$-53,390
TOTAL		\$1,180,716	\$969,904

1/Final computation based on individually approved projects will need to take into account the minor adjustments described in Mr. Kornfeld's letter of October 5, 1967.

Robert E. Jones
Robert E. Jones

Memorandum

TO : THE RECORD

DATE: November 27, 1967

FROM : Public Health Advisor
Grants Review BranchSUBJECT: Recommendation on Initial Planning Grant Application from
Northwestern Ohio Regional Medical Program at Toledo,
1 G02 RM 00063-01, National Advisory Council Meeting,
November 20-21, 1967

MOTION: Council recommended awarding a planning grant for the time
and amount requested.

Council was satisfied that a vast amount of planning had preceded this application. The high level of cooperation achieved in the region was noted, with special mention that financial assistance had been provided by the Heart Association. Since the medical college with which the Region will be affiliated is a developing one, Council stated that this is a unique opportunity for the medical college and regional program to develop together. Information was provided that Dr. Robert Tittle, the Program Coordinator, has recently arranged to work with the Program on a full time basis. With that problem resolved, the Council was favorably impressed with the proposal.

Patricia McDonald
Patricia McDonald



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Memorandum

TO : THE RECORD

DATE: November 24, 1967

FROM : Public Health Advisor
Grants Review Branch

SUBJECT: Recommendation on the Planning Grant Application submitted by the Northeastern Ohio (Cleveland) Regional Medical Program, 1 G02 RM 00064-01, National Advisory Council Meeting, November 20-21, 1967

MOTION: Approval in time and amount requested.

There was consensus that this planning proposal is reasonable in scope, size and socio-economic characteristics, with the to be expected encumbent urban complexities. It shows great promise of success in that pre-planning has been underway for sufficient time to allow for the formulation of a well-organized plan, and also it comes from a region rich in talent and medical resources.

The organizational framework leaves some minor questions as to relationships of the Program Coordinator and the Chairmen of the three categorical committees. Does he, for example, have the necessary "line" authority to make coordination of planning effective?

The evidence of involvement of urban and suburban peripheral interests to the Cleveland area could be stronger, but it was recognized that this is a common weakness of most planning applications. A strengthening of lay participation from the outlying areas would improve this aspect.

The overlapping in state licensing practices was felt to be a potential strength for inter-regional cooperative efforts.

Jessie F. Salazar

